County

FDDs

No

ROCKY KNOLL HEALTH CARE-FDD N7135 ROCKY KNOLL PRKWY

PLYMOUTH 53073 Phone: (920) 893-6441 Ownership:
Operated from 1/1 To 12/31 Days of Operation: 366 Highest Level License:
Operate in Conjunction with Hospital? No Operate in Conjunction with CBRF?
Number of Beds Set Up and Staffed (12/31/04): 37 Title 18 (Medicare) Certified?
Total Licensed Bed Capacity (12/31/04): 37 Title 19 (Medicaid) Certified?

Services Provided to Non-Residents	Age, Gender, and Primary Di	Length of Stay (12/31/04) %					
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis	%	Age Groups	% 	   Less Than 1 Year   1 - 4 Years	2.8
Supp. Home Care-Household Services	No	Developmental Disabilities	100.0	Under 65	86.1	More Than 4 Years	0.0
Day Services Respite Care	No No	Mental Illness (Org./Psy)   Mental Illness (Other)	0.0	65 - 74   75 - 84	8.3 2.8		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	2.8	*********	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent	
Congregate Meals Home Delivered Meals	No No	Cancer   Fractures	0.0		100.0	Nursing Staff per 100 Res   (12/31/04)	staents
Other Meals	No	Cardiovascular	0.0	65 & Over	13.9		
Transportation	No	Cerebrovascular	0.0			RNs	3.5
Referral Service	No	Diabetes	0.0	Gender %		LPNs	15.3
Other Services	No	Respiratory	0.0			Nursing Assistants,	
Provide Day Programming for	ĺ	Other Medical Conditions	0.0	Male	41.7	Aides, & Orderlies	61.4
Mentally Ill	Yes			Female	58.3		
Provide Day Programming for			100.0				
Developmentally Disabled	Yes				100.0	* * * * * * * * * * * * * * * * * * *	

## Method of Reimbursement

		edicare itle 18			edicaid itle 19				Private Pay			Family Care			Managed Care					
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				36	100.0	185	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	36	100.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		36	100.0		0	0.0		0	0.0		0	0.0		0	0.0		36	100.0

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Admissions, Discharges, and		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04										
Deaths During Reporting Period												
					Needing		Total					
Percent Admissions from:		Activities of	8		sistance of	% Totally	Number of					
Private Home/No Home Health	0.0	Daily Living (ADL)	-	One	Or Two Staff	Dependent	Residents					
Private Home/With Home Health	0.0	Bathing	5.6		44.4	50.0	36					
Other Nursing Homes	100.0	Dressing	44.4		19.4	36.1	36					
Acute Care Hospitals	0.0	Transferring	66.7		19.4	13.9	36					
Psych. HospMR/DD Facilities	0.0	Toilet Use	47.2		16.7	36.1	36					
Rehabilitation Hospitals	0.0	Eating	75.0		25.0	0.0	36					
Other Locations	0.0	*******	******	******	******	********	******					
Total Number of Admissions	1	Continence		%	Special Treatm	nents	%					
Percent Discharges To:		Indwelling Or Extern	al Catheter	2.8	Receiving Re	espiratory Care	2.8					
Private Home/No Home Health	0.0	Occ/Freq. Incontinen	t of Bladder	63.9	Receiving Tr	racheostomy Care	0.0					
Private Home/With Home Health	0.0	Occ/Freq. Incontinen	t of Bowel	66.7	Receiving Su	uctioning	0.0					
Other Nursing Homes	100.0				Receiving Os	stomy Care	2.8					
Acute Care Hospitals	0.0	Mobility			Receiving Tu	abe Feeding	0.0					
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed.	0.0	Receiving Me	chanically Altered Diet	s 33.3					
Rehabilitation Hospitals	0.0	į										
Other Locations	0.0	Skin Care			Other Resident	Characteristics						
Deaths	0.0	With Pressure Sores		0.0	Have Advance	e Directives	0.0					
Total Number of Discharges		With Rashes		0.0	Medications							
(Including Deaths)	2	İ			Receiving Ps	sychoactive Drugs	52.8					
- '		1			3							

Selected Statistics: This FDD Facility Compared to Similar Facilities & Compared to All Facilities

	This		DD		All	
	Facility %	Fac %	cilities Ratio	Fac %	ilties Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	97.3	93.1	1.04	88.8	1.10	
Current Residents from In-County	91.7	35.3	2.60	77.4	1.18	
Admissions from In-County, Still Residing	100.0	11.4	8.81	19.4	5.15	
Admissions/Average Daily Census	2.8	20.4	0.14	146.5	0.02	
Discharges/Average Daily Census	5.6	28.3	0.20	148.0	0.04	
Discharges To Private Residence/Average Daily Census	0.0	12.1	0.00	66.9	0.00	
Residents Receiving Skilled Care	0.0	0.0	0.00	89.9	0.00	
Residents Aged 65 and Older	13.9	16.0	0.87	87.9	0.16	
Title 19 (Medicaid) Funded Residents	100.0	99.1	1.01	66.1	1.51	
Private Pay Funded Residents	0.0	0.5	0.00	20.6	0.00	
Developmentally Disabled Residents	100.0	99.2	1.01	6.0	16.57	
Mentally Ill Residents	0.0	0.4	0.00	33.6	0.00	
General Medical Service Residents	0.0	0.4	0.00	21.1	0.00	
Impaired ADL (Mean)*	40.6	55.0	0.74	49.4	0.82	
Psychological Problems	52.8	48.1	1.10	57.7	0.91	
Nursing Care Required (Mean)*	4.9	10.7	0.45	7.4	0.65	